



OMB Control No. 2060-0161  
Approval expires 03/31/2019

OMB Control No. 2060-0693  
Approval expires 03/31/2019

EPA Form 6400-05

## RESIDENTIAL WOOD HEATER 30-DAY NOTIFICATION

### INSTRUCTIONS

**The manufacturer of an affected wood/pellet heater/central heater model line must notify the U.S. Environmental Protection Agency (EPA) of the date that certification testing is scheduled to begin. The EPA at least 30 days before the start of testing.**

This notification must be signed by a responsible representative of the manufacturer or an authorized representative. Once completed, this notification must be submitted to [WoodHeaterReports@epa.gov](mailto:WoodHeaterReports@epa.gov).

Affected residential wood-burning room heaters currently include, but are not limited to, adjustable burn rate stoves, catalytic adjustable burn rate stoves; hybrid adjustable burn rate stoves; single burn rate stoves; and pellet stoves. (40 CFR Part 60, Subpart AAA)

Affected residential wood-burning central heaters currently include, but are not limited to, indoor hydronic heaters ("wood boilers"); outdoor hydronic heaters ("outdoor wood boilers"); and forced-air furnaces ("warm air furnaces"). (40 CFR Part 60, Subpart QQQQ)

The public reporting and recordkeeping burden for this collection of information is estimated to average 8 hours per response. Send comments on the Agency's need for this information, the accuracy of the provided burden estimates, and any suggested methods for minimizing respondent burden, including through the use of automated collection techniques to the Director, Regulatory Support Division, U.S. Environmental Protection Agency (EPA) (2822T), 1200 Pennsylvania Ave., NW, Washington, D.C. 20460. Include the OMB control number in any correspondence. Do not send the completed application to this address.

Disclaimer: The statutory provisions and the EPA regulations described in this document contain legally binding requirements. This document is not a substitute for those provisions or regulations, nor is it a regulation itself. In the event of a discrepancy, please refer to Part 60 Subparts AAA AND QQQQ, Sections 60.537 and 60.5479. If you have additional questions, please contact Rafael Sanchez at 202-564-7028, Residential Wood Heater Compliance Program Lead, or via email at [sanchez.rafael@epa.gov](mailto:sanchez.rafael@epa.gov).

### MANUFACTURER INFORMATION

**Manufacturer's Name:** Maine Energy Systems LLC

**Manufacturer's Physical Address:**

8 Airport Road  
Bethel, Maine 04217

**Manufacturer's Mailing Address (if different from physical address):** PO Box 547

Bethel, Maine 04217

**Name and Title of Manufacturer's Responsible/Authorized Representative Submitting this Application:**

Ben Otten – President & COO

**Manufacturer's Contact E-mail:**  
ben@maineenergysystems.com

**Manufacturer's Phone Number:**  
(207) 824-6749

**Manufacturer's Website Address:**  
www.maineenergysystems.com

**Manufacturer's Website Address where the test report and owner's manual will be posted, if known:**  
www.maineenergysystems.com/autopellet-air-furnace

### AFFECTED WOOD HEATER MODEL INFORMATION

**Model Name(s) (as appearing on the certification test report). Please note: the model name and design number must clearly distinguish one model from another. The name and design number cannot include the EPA symbol or logo or name or derivatives such as "EPA":**

AutoPellet Air 28 **Catalog #:** PFS28

**Model Number(s) (as appearing on the certification test report, if applicable):**

**Type:** Autopellet Air 28 **Catalog #:** PFS28

<b>Heater Type Check one):</b>	<input type="checkbox"/> Adjustable Burn Rate Wood Heater	<input type="checkbox"/> Pellet Stove	<input type="checkbox"/> Single Burn Rate Heater	<input type="checkbox"/> Hydronic Heater	<input checked="" type="checkbox"/> Forced Air Furnace
--------------------------------	---	---------------------------------------	--	--	--

<b>Hydronic Heater Type (Check one):</b>	<input type="checkbox"/> Full Storage	<input type="checkbox"/> Partial Storage	<input type="checkbox"/> No External Storage	<input type="checkbox"/> Indoor	<input type="checkbox"/> Outdoor
--	---------------------------------------	--	--	---------------------------------	----------------------------------

<b>Forced-Air Furnace Type (Check one):</b>	<input type="checkbox"/> Small (less than 65,000 BTU/hr heat output)	<input checked="" type="checkbox"/> Large (greater than 65,000 BTU/hr heat output)
---	--	--

<b>Fuel Tested (Check one):</b>	<input type="checkbox"/> Crib	<input checked="" type="checkbox"/> Pellet	<input type="checkbox"/> Cordwood	<input type="checkbox"/> Wood Chips	<input type="checkbox"/> Other:
---------------------------------	-------------------------------	--	-----------------------------------	-------------------------------------	---------------------------------

<b>Certification Step:</b>	<input type="checkbox"/> 2015	<input type="checkbox"/> 2016 (FAFs only)	<input type="checkbox"/> 2017 (FAFs only)	<input checked="" type="checkbox"/> 2020 (ALL HEATERS)
----------------------------	-------------------------------	---	---	--

**Equipped with a catalytic combustor?** ☐ Yes ☒ No

### EPA-APPROVED TEST LABORATORY

**Name of EPA-Approved Test Laboratory:**  
RISE Research Institutes of Sweden AB

**Name(s) of Person(s) Authorized and/or Responsible for Conducting Certification Test:**

Henrik Persson

**Phone:**  
+46 10 516 55 21

**E-mail:**  
Henrik.persson@ri.se

**Fax:**  
033-13 55 02

**City:**  
Västerås

**State:**  
Sweden

**ZIP Code:**

### EPA-APPROVED THIRD-PARTY CERTIFIER

**Name of EPA-Approved Third-Party Certifier:**  
RISE Research Institutes of Sweden AB

**Name(s) of Person(s) Authorized and/or Responsible for Reviewing Test Report and/or Issuing Certification of Conformity:**

Henrik Persson

**Phone:**  
+46 10 516 55 21

**E-mail:**  
Henrik.persson@ri.se

**Fax:**  
033-13 55 02

**City:**  
Västerås

**State:**  
Sweden

**ZIP Code:**

## COMPLIANCE TEST INFORMATION

**Test Method(s):**

CSA B415.1-10 for 2020 certification. Using Method 28 burn rate categories

**Date(s) of Proposed Test:**

September 21, 2020

**Testing Location (Name and Address):**

RISE Institute of Sweden AB  
Västeråsen, Brinellgatan 4, 504 62 Borås  
Sweden

**Technician's Contact Name:**

Henrik Persson

**Title:****Phone Number:**

+46 10 516 55 21

**Email Address:**

Henrik.persson@ri.se

BJ Otten President and COO

**Print Name and Title of Authorized Official****Signature****Date**

**Telephone Number:** (207) 824-6749

**Email Address:** ben@maineenergysystems.com

**Remarks:**

v1